STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Nancy Mace for Congress 295 Seven Farms Drive ADDRESS (number and street) Suite C-186 (Check if address is changed) Charleston 29492 SC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nancymace@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) nancymace.org (Check if address is changed) DATE 2021 C00710103 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 09 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name Cand		Mace, Nancy, , ,	
Cand Party	idate Affiliati	on REP Office Sought: House Senate President	State SC District 01
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.
Polit	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	. ago c
Nancy Mace for Congress	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
	,
NANCY MACE VICTORY FUND	
228 S. WASHINGTON ST. Mailing Address	
STE. 115 ALEXANDRIA VA	22314
OUTV	
CITY STA	TE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Repre	sentative Leadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the books and records.	the person in possession of committee
Kilgore, Paul, , ,	
Full Name 824 S Milledge Ave Ste 101	
Mailing Address	
_ Athens	, , ,30605
Allens	
Title or Position CITY STATE	ZIP CODE
Treasurer Telephone number	706 534 7780
3. Treasurer: List the name and address (phone number optional) of the treasurer of the commany designated agent (e.g., assistant treasurer).	nittee; and the name and address of
Full Name Kilgore, Paul, , ,	I
of Treasurer	
Mailing Address 824 S Milledge Ave Ste 101	
Athens	
CITY STATE Title or Position , Treasurer	ZIP CODE
Telephone number	

TEC TOIL	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Goode, Michael, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605 CITY STATE Z	IP CODE
Title or Position Assistant Treasu	urer	34 - 7780
	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds.	accounts, rents
Name of Bank, [Depository, etc. South Carolina Federal Credit Union	
Name of Bank, Dank, Dank		
	South Carolina Federal Credit Union	
	South Carolina Federal Credit Union	
	South Carolina Federal Credit Union PO Box 190012 North Charleston SC 29419	ZIP CODE
	South Carolina Federal Credit Union PO Box 190012 North Charleston CITY STATE Z	ZIP CODE
Mailing Address	South Carolina Federal Credit Union PO Box 190012 North Charleston CITY STATE Z	ZIP CODE
Mailing Address	South Carolina Federal Credit Union PO Box 190012 North Charleston CITY STATE Z Depository, etc.	ZIP CODE
Mailing Address Name of Bank, E	South Carolina Federal Credit Union PO Box 190012 North Charleston CITY STATE Z Depository, etc.	ZIP CODE
Mailing Address Name of Bank, E	South Carolina Federal Credit Union PO Box 190012 North Charleston CITY STATE Z Depository, etc.	ZIP CODE

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.	g Participant:		
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
TAKE BACK THE	HOUSE 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824-0844
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identify Full Name	by name, address (phone number – optional)	1 1 1 1 1 1 1	
Mailing Address			
	I contract the contract to		
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	STATE ▲ lephone Number	ZIP CODE A
anks or Other Depositor afety deposit boxes or mai	Te ies: List all banks or other depositories in which tintains funds. town Valley Bank	lephone Number	
anks or Other Depositor afety deposit boxes or mai	Te ies: List all banks or other depositories in which tintains funds.	lephone Number	
anks or Other Depositor afety deposit boxes or main ame of Bank, epository, etc.	Te ies: List all banks or other depositories in which tintains funds. town Valley Bank	lephone Number	

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h). Joint Fundraisin		FEC ID number	С
		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Team Mace			
Mailing Adalys	824 S. Milledge Ave. Ste. 101		
Mailing Address			
	Athens	CA	30605
		GA	
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
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Full Name	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds. Bank	STATE A	ZIP CODE A

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
FreedomWorks \	/ictory 2021		
Mailing Address	111 K St NE		
	Ste 600		
	Washington	DC	20002
Deletieneleier	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Sp
Connecte		nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connected Agent: Identification of the Connected Agent: I	Affiliated Committee	nt Fundraising Representa	Leadership PAC Special Leadership Leader
Connecte Designated Agent: Identi Full Name	Affiliated Committee X Join fy by name, address (phone number – optional) CITY		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Y Join fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Connected Pesignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Penals afety deposit boxes or make the penals afety deposit boxes or make the penals afety deposit boxes or make the penals afety depository, etc.	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	ZIP CODE A

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5(g) o	r(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4		FEC ID number C	
6.	Name of Any Connected GOP WINNING W	Organization, Affiliated Committee, Joint Fundrais	sing Representative, or Leadership PAC Sp	onsor
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115 ALEXANDRIA	, , VA , , 22314	
	Relationship:	CITY A	STATE ▲ ZIP CODE △	
	Connected	Organization Affiliated Committee	undraising Representative Leadership PAC	Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲	
		Telep	phone Number	
	safety deposit boxes or ma	ies: List all banks or other depositories in which the intains funds.	e committee deposits funds, holds accounts, r	rents
	Depository, etc.	2365 W. Broad Street		
	Mailing Address			
		Athens	GA 30606	
_		CITY ▲	STATE ▲ ZIP CODE ▲	

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g) or (h). Joint Fundra	ising Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	ted Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
ZUZZ FIIASL I	PAIRIOI DAI JEC		
Mailing Address	228 S. WASHINGTON STREET SUITE 115		
	ALEXANDRIA	, VA	22314
	CITY A	STATE A	ZIP CODE ▲
Relationship:	CITY	0171122	
Conne		Fundraising Representa	ative Leadership PAC Sponso
Conne	ected Organization Affiliated Committee X Joint		Leadership PAC Sponso
Designated Agent: Ide	ected Organization Affiliated Committee X Joint		Leadership PAC Sponso
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Designated Agent: Ide Full Name Mailing Address	ected Organization Affiliated Committee Joint Partify by name, address (phone number – optional)	Fundraising Representa	
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tanks or Other Depositor afety deposit boxes or ma	ries: List all banks aintains funds.	CITY A	STATE ▲ Telephone Number	
tanks or Other Depositor	▼ ries: List all banks	CITY A	STATE ▲ Telephone Number	
	▼	CITY A	STATE ▲ Telephone Number	
TITLE OR POSITION			STATE ▲	ZIF CODE
TITLE OR POSITION				ZIF CODE A
				ZIP CODE ▲
Mailing Address				
Full Name				
		s (phone number – optional)	and and an	
	d Organization		int Fundraising Represent	
Relationship:		CITY A	STATE A	ZIP CODE A
	Athens		, GA	30605
Mailing Address	Ste. 101			
Mailing Address	824 S Milledge	Ave		
ame of Any Connected Mace Majority Fur	=	iliated Committee, Joint Fur	draising Representative	e, or Leadership PAC Spons
4.				
A			FEC ID number	С
3.			FEC ID number	С
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1			FEC ID number	C